

How is share of cost calculated?

Share of cost is based on the medically needy income level (MNIL) and the size of your household. It is calculated using the difference between your income and the MNIL.

For example, someone who lives with a spouse and one child, a household of three, and has an adjusted household monthly income of \$1,000. Their share of cost comes from the medically needy income level (MNIL) for their household, \$492, subtracted from their monthly income, \$1,000, which then equals \$508 as the share of cost.

\$1000 (countable income of 3-person home)
- **\$492 (MNIL for family of 3)**
\$508 share of cost

What if I don't have many medical expenses?

A share of cost is most helpful to those with ongoing medical needs. Depending on the share of cost amount, it may not be a program for everyone.



Share of Cost Calculation Chart

Household Size	Medically Needy Income Level (MNIL)
1	392
2	392
3	492
4	584
5	675
6	775
7	867
8	967
9	1,059
10	1,150

Contact Medicaid

Toll Free: (855) 632-7633
Online: www.ACCESSNebraska.gov
Email: DHHS.ANDICenter@nebraska.gov

Medicaid Rules and Regulations
For income levels, federal poverty levels, and resource amounts, visit:
<https://dhhs.ne.gov/Documents/477-000-012.pdf>

For current guidelines on the Medically Needy Standard, visit:
<https://dhhs.ne.gov/Documents/477-000-037.pdf>

For current guidelines for share of cost, visit:
<https://dhhs.ne.gov/Documents/477-000-045.pdf>

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Share of Cost

What it **MEANS**
who it **AFFECTS**,
and how it **WORKS**



NEBRASKA

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DEPT. OF HEALTH AND HUMAN SERVICES

Medicaid & Long-Term Care

What does share of cost mean, and what can it cover?

A share of cost (SOC) refers to the cost of medical expenses you must have during any given month before you receive assistance from Medicaid. This can also be called a “spenddown.”

If you are responsible for a share of cost of medical treatment, it means you qualify for Medicaid but have an income that exceeds the State of Nebraska’s income limits.

Most expenses normally covered under Medicaid can also be covered under a share of cost. Some examples include:

- Physicians’ appointments;
- Dental care; and
- Medical equipment

Medical expenses accumulated by other members of your household can also be included in share of cost.



Who is eligible for share of cost, and how will DHHS know that the share of cost has been met?

Many different Medicaid eligible groups whose income is above household limits may have to pay a share of cost. These groups can include the aged, blind and the disabled population along with low-income parents or families.

Other groups that may fall under a share of cost arrangement include those receiving long-term care services and supports which includes the Aged & Disabled (AD) or Developmental Disability (DD) waivers.

DHHS will send you a form each month for your health care provider to fill out and sign that verify the medical costs you have every month. These forms can show that you have enough medical expenses to be eligible to receive assistance from Medicaid.

My Share of Cost is correct, but I still can not afford it, what else can I do?

Depending on your situation, you may be able to get health care through the Health Insurance Marketplace. Visit www.healthcare.gov for more information.



Exceptions to the share of cost form process:

If you have share of cost obligations that are paid to a nursing home, assisted living waiver, or in-home waiver, you do not receive share of cost forms for your healthcare provider to verify your share of cost. This is because your monthly obligation is paid directly to your health care or waiver service provider.